16th March 1956]

THE HON. SRI C. SUBRAMANIAM : I have already stated that the matter is under examination by Government.

SRI A. RATNAM : May I know the names of the slums that come under evacuee properties?

THE HON. SRI C. SUBRAMANIAM : I am sorry I do not have the information here.

Leprosy Relief Centres

* 3431 *Q.*—SRI M. PALANIYANDI (on behalf of Sri V. R. Krishna Ayyar) : Will the Hon the Minister for Health be pleased to state :

(*a*) whether the Government have any proposal to start Leprosy Relief Centres in the State in 1956;

(*b*) if so, how many for the whole State and how many for Malabar?

THE HON. SRI A. B. SHETTY : (*a*) Yes, Sir.

(*b*) The Government have already sanctioned the opening of a Leprosy Subsidiary Centre at Ethapur, Salem district, in January 1956. A proposal for opening three more Subsidiary Centres during 1956 is under consideration. The exact location of the centres will be decided shortly. Another proposal to open two Leprosy Relief Centres in Malabar district is also under the consideration of the Government.

SRI V. BALAKRISHNAN : In addition to these centres, will the Government be pleased to direct the Headquarters and Divisional Hospitals to introduce some ameliorative measures by way of weekly injections to leper patients and attract them to such hospitals by the grant of weekly doles at the rate of 4 annas per head?

THE HON. SRI A. B. SHETTY : Leprosy treatment is being given at all Government Hospitals. Tablets are given for oral administration and in necessary cases hydno carpus oil injections are also given.

SRI M. JAGANNATHAN : May I know which district suffers most from the incidence of leprosy and what are the measures taken by our Government to combat the disease in that particular district?

THE HON. SRI A. B. SHETTY : The incidence is very heavy in the South Arcot district, Sir.

SRI S. DAIVASIGAMONEY : May I know the number of leprosy clinics which are run by private institutions or individuals? May I also know what kind of aid is given by the Government to them?

THE HON. SRI A. B. SHETTY: I cannot give the number of private institutions. But, there are about 1,166 patients in such institutions and the annual maintenance grant has been enhanced this year. There is a provision for it in the budget.

SRI K. V. RAMASWAMY: The Hon. Minister said that a leprosy centre was opened at Ethapur. May I know the number of in-patients treated there?

THE HON. SRI A. B. SHETTY: I wonder how the hon. Member expects me to answer that question just now here.

9-20 a.m. DR. K. B. MENON: Since there is a resistance on the part of these leprosy patients to go to these centres partly due to lack of education, will the Government try to afford facilities to each family to segregate the members and carry on an education campaign in that respect?

THE HON. SRI A. B. SHETTY: The Central Government have launched a National Leprosy Control Project. Under this Project they are having leprosy treatment centres in endemic areas and it is found that more people are now coming for treatment because they find that the modern method of treatment by Sulphones has been found to be much more effective than all the previous methods that were in vogue.

SRI A. M. RATHNASWAMY: Is it a fact that most of these leprosy centres have been opened by Missionary institutions and what is the kind of assistance or help given by this Government in recognition of this meritorious service?

THE HON. SRI A. B. SHETTY: We do recognize the ameliorative work which the Christian Missions have been carrying out. As I said, the capitation grant per patient has been increased from Rs. 9 to Rs. 12 with effect from the budget year.

SRI M. PALANIYANDI: The leprosy-affected persons are simply wandering in the streets of the mufassal towns. May I know whether the Government are having any programme to have them segregated out of the town and treat them?

THE HON. SRI A. B. SHETTY: There is no such great danger of infection from leprosy beggars. Leprosy infection requires close, intimate and prolonged contact. Leprosy is much less infectious than, say, tuberculosis.

SRI K. VINAYAKAM: The bed strength in Tirumani Leprosy Sanatorium is limited. But since there is a feeling that any leper who goes to Chingleput would manage to get admission into the sanatorium, lepers in the State are tempted to go to Chingleput. After going there and getting disappointed, they do not return to their native places and wander about the town of Chingleput with the result of spreading the disease or at least giving an obnoxious sight to the people. To avoid this, will the Government take steps to open a leprosy relief centre along with the sanatorium so that at least those who do not manage to get a seat inside the sanatorium would be at least treated in the relief centre.

16th March 1956]

THE HON. SRI A. B. SHETTY : The hon. Member has not made it clear what exactly he means by relief centre. I may tell him that the Leprosy Sanatorium at Tirumani is probably the biggest sanatorium in the whole of India. It has been taken over from the Madras Government and it is being converted into a leprosy research and teaching centre.

SRI S. DAIVASIGAMONEY : Subject to correction, I understand that leprosy is of two kinds. One is contagious and the other is not contagious. But both of them are pitiable to look at. May I know in such cases whether one of the treatment that is given to these patients is sterilization.

THE HON. SRI A. B. SHETTY : It is true that there are two kinds of leprosy, one which is supposed to be infectious and the other not so infectious. Sterilization can be done in the case of people who want it.

SRI M. JAGANNATHAN : Arising out of the reply given by the Hon. Minister that South Arcot district suffers most from the incidence of leprosy, may I know what exactly are the special measures taken by our Government to combat that disease in that particular district?

THE HON. SRI A. B. SHETTY : There is a study and treatment centre at Tirukkoyilur and there are a number of clinics in the district and special staff has been employed for carrying on leprosy relief work. The hon. Member who hails from that district may take more interest in this matter and find out what measures are being taken and what further measures are necessary.

SRI G. GOVINDAN : கனம் சபாநாயகர் அவர்களே, இராமநாதபுரம் ஜில்லா மானாமதுரையில் வைகை ஆற்றங்கரையில் ஒரு குஷ்டரோகி ஆஸ்பத்திரி இருக்கிறது. அதிலுள்ள குஷ்டரோகிகள் வைகையாற்றுத் தண்ணீரில் தினசரி குளிப்பதால் மானாமதுரையிலுள்ள ஜனங்களுக்கு குஷ்டரோகம் பரவிவருகிறது. அதைத் தடுக்க அந்த குஷ்டரோக ஆஸ்பத்திரியை மண்டபத்திற்குப் பக்கத்திலிருக்கும் தீவுகளுக்குக்கொண்டு போக சர்க்கார் ஏற்பாடு செய்வார்களா ?

THE HON. SRI A. B. SHETTY : The number of leprosy patients is very large in this State. It is not a practical proposition to segregate them and put them in any island.

SRI K. VINAYAKAM : We very well appreciate the elusive answers given by the Hon. Minister. We hope the Hon. Speaker will direct the Hon. Minister to give us direct answers. I never made a confusion about the situation. The lepers who seek admission do not get seats in the sanatorium with the result they are left to themselves. They do not return back to their native places. They are scattered all over Chingleput town and are causing nuisance to the public. Has the Government any alternative scheme at least to oust them somewhere in a segregated place or to absorb them in the sanatorium? May I also know whether this disease is a hereditary one?

[16th March 1956

THE HON. SRI A. B. SHETTY : The Government of India have proposals for starting homes for leprosy beggars. Leprosy is not hereditary. But young children are very liable to get the infection. Therefore, child leprosy should be prevented by segregating either the patients or the children.

SRI V. K. RAMASWAMI MUDALIAR : This leprosy sanatorium is in the constituency of Sri Vinayagam. May I know how many times he has visited the sanatorium?

Sri K. Vinayakam rose on a point of order and sat down.

SRI R. V. SWAMINATHAN : Arising out of the answer to the supplementary question put by Sri G. Govindan, may I ask the Hon. Minister to consider this question seriously, since there is a feeling in Manamadurai and Sivaganga areas that this hospital located near Manamadurai on the bank of the Vaigai river is the reason for the spread of this disease. There are nearly half a dozen nice small and big islands within a few furlongs from our land very near Mandapam and as they can accommodate any number of patients, a sanatorium can be built in those islands.

THE HON. SRI A. B. SHETTY : The hon. Member is entertaining very old notions about leprosy and its infections. The present idea is quite different. Leprosy is not at all so infectious as it is sought to be made out. There is no necessity for segregating leprosy patients. They are part of our certain families and society and it is our duty to look after them, rather than send them away to islands.

9–30 a.m. SRI K. V. RAMASWAMI : May I know whether the Government is aware of the fact that a number of leprosy patients have committed suicides in front of the Sanatorium at Chingleput because of not getting admission in the clinic?

THE HON. SRI A. B. SHETTY : I have no information about it. The hon. Member may kindly furnish me particulars if he has got any in his possession.

SRI S. PANCHAKSHARAM : Will the Hon. Minister be pleased to state the number of people afflicted with this fell disease in this State and if the number is not very large will he consider the desirability of segregating them and keeping them in isolation camps so that the further spread of the disease could be prevented?

THE HON. SRI A. B. SHETTY : The hon. Member is repeating the very same impracticable proposition. No such State-wide leprosy survey has been made and leprosy in the initial or early stages is very difficult to detect. It requires a certain amount of training. A number of doctors are now being given training in batches of six at a time at the Tirumani Leprosy Sanatorium in order that they may better diagnose and treat leprosy cases.

SRI S. THINAKARASAMI THEVAR : May I know from the Hon. Minister whether the Government have received any report from the Provincial Leprosy Organizer who has almost toured all the areas in the State and whether he has recommended names of places where leprosy relief centres are to be started?

16th March 1956]

THE HON. SRI A. B. SHETTY : Leprosy workers are aware in general where the infection is heavy and where the infection is low. There is no proposal for starting leprosy relief centres in so many areas. Our funds are limited and we can tackle the problem only to a limited extent.

SRI M. NARAYANA KURUP : Are there not different kinds of leprosy some of which are highly infectious and in the same case the intensity of infection differs at different stages?

THE HON. SRI A. B. SHETTY : Yes, Sir, I have already stated that one form of leprosy is more infectious and the other is hardly infectious and leprosy may become more infectious at one stage and less infectious at another stage. Leprosy is particularly infectious in the early stages when we can hardly detect it.

SRI S. DAIVASIGAMONEY : Sir, in England and Western countries once leprosy was very prevalent. Now it has almost been eradicated. May I know whether this Government have any programme to eradicate completely leprosy from our State and if so within what time they will be able to eradicate it?

THE HON. SRI A. B. SHETTY : Not only leprosy, Sir, but many other communicable diseases have been eradicated to a large extent in Western countries on account of high standards of living there and the Public Health measures they have taken. We are at a very low stage of economic development. It will take considerable time for us to think of succeeding in eliminating leprosy and such other communicable diseases.

SRI S. SWAYAMPRAKASAM : Is it not a fact, Sir, that in the initial stages by giving tablets, the disease is being arrested. If that be so, will the Hon. Minister come to an understanding with his Colleague in charge of social services and similar other organizations and give training to such of the social workers who are expected to go to the villages so that they can find out during their visits to the villages persons affected with this disease and give them the tablets and thus arrest the disease even in the initial stages?

THE HON. SRI A. B. SHETTY : Yes, that is the idea. Leprosy should be tackled at an early stage when it is amenable to treatment. But most of our people are only talking about leprosy and relief work. It is only the missionary people that are really doing practical work. Now at Polambakkam we have a Belgeir leprosy unit that is doing very good work.

SRI R. S. ARUMUGAM : May I know from the Hon. Minister whether Government have taken any relief measures to treat nearly 75 per cent of the people residing at Vallimalpuram village in Tirunelveli district who are afflicted with this disease?

THE HON. SRI A. B. SHETTY : I have already stated that there is a proposal for starting three more subsidiary centres during the next year and the necessity for starting these centres particularly in endemic areas will be considered.

[16th March 1956

SRI A. RATNAM: May I know whether Government have taken any action to remove lepors begging in streets and near bus-stands in the city?

THE HON. SRI A. B. SHETTY: There may be a large number of leprosy beggars in various places particularly in places of pilgrimage where they expect charity from the devotees who go there. I have said that there is a proposal under consideration at the Centre for opening homes for leprosy beggars. In Madras, the city private institutions such as the Daya Sadan are giving shelter to leprosy patients.

DR. K. B. MENON: Is not the dhoby a medium of communication of the infection and if so have Government taken any measures in villages which are highly infected to prevent such communication through the dhoby?

THE HON. SRI A. B. SHETTY: That is a matter which has to be left to the good sense of the people and the educational level to which they have gone up. It is not possible for Government to exercise control in all such matters.

SRI R. V. SWAMINATHAN: Since the Hon. Minister does not agree to the suggestion to segregate these people and since he has also admitted that at certain stages this disease is very infectious, will the Hon. Minister tell us the steps that have been taken by Government to teach the people afflicted with this disease not to mingle with others and thus communicate the disease to others? Have they set up any propaganda machinery for this purpose and if so what is the nature of that machinery?

THE HON. SRI A. B. SHETTY: The Hind Kusht Nivaran Sangh is doing a wide and effective educative campaign. Every year they are having one month's publicity campaign for this purpose.

SRI T. C. NARAYANAN NAMBIAR: May I know from the Hon. Minister whether Government have received any representation from the management of the Mission Leprosy Relief Centre at Pudiyara, Kozhikode taluk to the effect that they are not in a position to cope up with the every increasing number of in-patients for want of funds and if so what steps Government have taken to see that the institution is helped to give relief to the leprosy affected people?

THE HON. SRI A. B. SHETTY: I have said, Sir, that help is being given to private institutions which take in leprosy patients.

SRI M. NARAYANA KURUP: Sir, the Hon. Minister said that people talk of leprosy but do little relief work. It may be true. It is due to the fact that there is the traditional notion that leprosy is incurable and that it is highly infectious. As a first step to deal with this problem will be Government carry on intensive propaganda to inform the people about the true nature of the disease and that it can be cured, so that they may interest themselves more in leprosy relief work?

16th March 1956]

THE HON. SRI A. B. SHETTY : The Government and the Hind Kusht Nivaran Sangh are carrying on a campaign for this purpose by means of pamphlets, lectures, posters and in so many other ways.

SRI S. THINAKARASWAMI THEVAR : May I know from the Hon. Minister whether Government have received any reports from the District Medical Officer, Madurai and the Honorary Provincial Leprosy Organizer and from the public of Usilampatti firka that 90 per cent of the people at Katadevanpatti village are lepors and is it not a fact that Government have come to a decision to start a separate leprosy relief centre in that place?

THE HON. SRI A. B. SHETTY : Sir, I cannot give that information off hand. If the hon. Member writes to me or comes to me I shall be very glad to furnish him the required information.

SRI L. C. PAIS : Having regard to the very useful work done by Fr. Muller's Mission in Mangalore, will the Government think of increasing the scale of grants given to it, so that it may give a greater impetus to them to take greater interest in the leprosy patients?

THE HON. SRI A. B. SHETTY : Not only for Fr. Muller's institutions but to all private institutions, I have said, that capitation grant has been increased from Rs. 9 to Rs. 12.

SRI N. C. RAMASWAMI KANDER : இந்த நிலையங்கள் தாலுகா ஹெட்குவார்டர்ஸிலும், ஜில்லா ஹெட்குவார்டர்ஸிலும் தான் அதிகமாக இருக்கின்றன. ஆகவே இந்த வியாதியைத் தடுப்பதற்காக சர்க்காரால் இந்த சௌகரியங்கள் செய்யப்பட்டிருக்கின்றன என்பது கிராம ஜனங்களுக்குத் தெரிவதில்லை. ஆதலால் சுமார் 10 அல்லது 20 கிராமங்கள் கொண்ட பிர்க்காக்களின் ஹெட்குவார்டர்ஸில் இந்த நிலையங்களை ஏற்படுத்துவதற்கு சர்க்கார் முன்வருமா ? 9-40 a.m.

THE HON. SRI A. B. SHETTY : Yes, Sir. In some of the National Extension Service blocks, special schemes for dealing with leprosy are in operation.

SRI S. PANCHAKSHARAM : What are the outward symptoms from which laymen can find out that a man is suffering from leprosy in its initial stages?

THE HON. SRI A. B. SHETTY : Pamphlets have been published by the Public Health Department. The hon. Member may kindly take some of these and read them. But even without reading them, leprosy in advanced stages can be made out by the thickening of the skin and the deformities of the limbs.

Syphon system across the Kandaparichen channel

* 3432 *Q.*—SRI P. VENKATESHA SHOLAGAR : Will the Hon. the Minister for Public Works be pleased to state—

(*a*) the estimated cost of the proposed Syphon System across the Kandaparichen channel under the Korayar in Mannargudi taluk of Tanjore district; and

(*b*) when this work will be taken up for execution.